ISDH 2004 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

Gibson General Hospital

City: Princeton   County: Gibson   Year: **2004**

Provider Type: Critical Access Hospital

I. Inpatient Care			
Hospital Service Description	**Number of Set Up Beds**	**Number of Discharges**	**Number of Patient Days**	**Average Charge Per Discharge**
Burn Care	0	0	0	$0
Cardiac Intensive	0	0	0	$0
ICU Med/Surg	4	112	509	$4,388
ICU Neonatal	0	0	0	$0
ICU Pediatric	0	0	0	$0
Medical/Surgical	17	812	3,150	$2,678
Neonatal Intermed	0	0	0	$0
Obstetrics	4	145	327	$2,817
Pediatric	0	0	0	$0

Psychiatric	0	0	0	$0
Rehabilitation	0	0	0	$0
Substance Abuse	0	0	0	$0
Swing Beds	NA	0	0	$0
Other Services	3	21	7,986	NA
Acute Subtotal	28	1,098	11,972	NA
Normal Newborn	6	140	326	$794

II. Outpatient Visits			
Circulatory System	2,562	Digestive System	1,260
Endocrine System	2,762	Injuries and Poison	6,292
Mental Disorder	1,187	Musculoskeletal	3,459
Neoplasms	514	Nervous	1,412
Respiratory	1,831	Urinary	1,791
Other/Unknown	12,622	Total Visits	35,692
Number of Visits to Emergency Department			9,038
Percent of Emergency Department Visits of Total Visits			25.3%

Identification of Hospital Services

Each hospital has identified if it has one or more of a standard list of 66 services. This list of 52 services is updated annually by each hospital from the information initially requested by the Centers for Medicare & Medicaid Services when the hospital was initially certified for Medicare payment. The other 14 services have been identified in other sections of this report.

N - Ambulance Service (Owned)	N - Alcohol/Drug Service	Y - Anesthesia Services
Y - Audiology	Y - Blood Bank	N - Cardiac Cath Lab
N - Cardiac-Thoracic Surgery	N - Chemotherapy Service	N - Chiropractice Service
Y - CT Scanner	Y - Dental Service	Y - Dietetic Service
N - Extracorporeal Lithotripter	N - Gerontological Service	Y - Home Health Service
N - Hospice	Y - Laboratory Anatomical	Y - Laboratory Clinical
Y - Magnetic Resonance (MRI)	Y - Neonatal Nursery	N - Neurosurgical Service
Y - Nuclear Medicine	Y - Occupational Therapy	Y - Operating Room
Y - Opthalmic Surgery	N - Optometric Service	N - Organ Bank
Y - Organ Transplant	Y - Orthopedic Surgery	Y - Pharmacy
Y - Physical Therapy	N - PET Imaging	Y - Postoperative Recovery
Y - Psychiatric Emergency	N - Psychiatric Child	N - Psychiatric Forensic
N - Psychiatric Geriatric	Y - Radiology Diagnostic	Y - Radiology Therapeutic
N - Reconstructive Surgery	Y - Respiratory Care	N - Rehab Inpat CARF
Y- Rehab Inpat Non CARF Acc	N- Rehab Outpatient	N- Renal Dialysis

Y - Social Services	Y - Speech Pathology	Y - Surgical Inpatient
Y - Surgical Outpatient	N - Trauma Center Certified	N - Transplant Cnt Medicare
N - Urgent Care Center		

NA =	Not applicable	NMF =	No meaningful figure	NR =	Not reported